Silver State 21st Century PAC Non Federal Name (print)	Office	District
3069 Conquista Court, Las Vegas, NV 89121	(702) 734-2887	
Mailing Address (include city and zip code)	Telephone No.	
rlg@lvcm.com		
E-Mail Address		3 PAC
Select Appropriate Boxe(s) [] CANDIDATE [X] PAC [] BAG [] P	OLIPRIY IIINDE	XP [] AMEN
[] Report # 1 Due August 27, 2002 Office with a 2-year term Period : Jan. 5, 2001 — Aug. 22, 2002 Office with a 4-year term Period : Dec. 20, 1998 Aug. 22, 2002	-	
Office with a 6-year term Period : Dec. 6, 1996 Aug. 22, 2002 BAGs only: Period: Dec. 7, 2000 Aug. 22, 2002	FIL	Egg.
[] Report # 2 Due October 29, 2002 Period: Aug. 23, 2002 Oct. 24, 2002	DEC 2	3 2002
[X] Report # 3 Due January 15, 2003 Period: Oct. 25, 2002 Jan. 3, 2003	DEAN HEI SECRETARY (LLER OF STATE
BAGs only: Period: Oct. 25, 2002 Dec. 5, 2002 BALANCE	FOR OFFIC	E USE ONLY
This figure should reflect thhe balance shown on your last Disposition Unspent Contributions Report, or last Contributions & Expenses Report		\$1,046.4
CONTRIBUTION SUMMARY		
CONTRIBUTION SUMMARY "Contribution" means a gift, loan, conveyance, deposit, pa of maney or anything of value other than the services of a volu	yment, transfer or distri unteer received. (NRS 2	294A.007)
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"Contribution" means a gift, loan, conveyance, deposit, pa of maney or anything of value other than the services of a volu 1. Total amount of monetary contributions in excess of \$100	yment, transfer or distri unteer received. (NRS 2	294A.007)
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"Contribution" means a gift, loan, conveyance, deposit, pa of maney or anything of value other than the services of a volue. 1. Total amount of monetary contributions in excess of \$100. 2. Total amount of monetary contributions of \$100 or less. Actual number of monetary contributions of \$100 or less. 3. Interest and income earned on contributions, if any. 4. TOTAL AMOUNT OF ALL MONETARY CONTRIBUTIONS (add lines 1 thr.). 5. Total amount of In Kind Contributions. EXPENSES SUMMARY. 6. Total amount of monetary expenses in excess of \$100. 7. Total amount of monetary expenses of \$100 or less. 8. Expense for filling fee. 9. TOTAL AMOUNT OF ALL MONETARY EXPENSES (add lines 6 through the Remaining Balance (Subtract line 9 from Remaining Balance)	ough 3)	\$5,000.0 \$5,000.0 \$5,000.0 \$0.0 6,046.4 \$0.0